

Professional Licensing Agency
402 West Washington Street
Room W072
Indianapolis, Indiana 46204



Michael R. Pence
Governor of Indiana
Nicholas W. Rhoad
PLA Executive Director

Application for Renewal of Home Inspector License

Your license as a home inspector in the state of Indiana expires on October 1, 2013. To renew your license, please complete this form in its entirety and submit it with the renewal fee of \$400.00 to the office address shown in the above right corner with a postmark date of no later than October 1, 2013. Include a \$50 late fee if postmarked after October 1, 2013. You may also renew online at www.pla.in.gov.

APPLICANT INFORMATION

Last Name	First Name	License Number
Street Address		
City	State	Zip Code
Phone Number	Email Address	

QUESTIONS

1. Since you last renewed, has any professional license, certificate, registration or permit you hold or have held been disciplined or are formal charges pending?	YES	NO
2. Since you last renewed, have you been denied a license, certificate, registration, or permit in any state?	YES	NO
3. Since you last renewed, and except for minor violations of traffic laws resulting in fines and arrests or convictions that have been expunged by a court, have you been arrested, entered into a diversion agreement, been convicted of, pled guilty to, or pled nolo contendere to any offense, misdemeanor, or felony in any state?	YES	NO
4. Do you currently hold general liability coverage of at least \$100,000 as required by IC 25-20.2-5-2?	YES	NO
5. Have you completed the required continuing education hours as outlined in 876 IAC 1-5-1 (32 hours)?	YES	NO

LICENSEE AFFIRMATION

By signing below, I hereby attest that the information listed on this renewal application is true, complete and correct.	
Signature of Licensee	Date (month, day, year)

Visit www.pla.in.gov for additional information regarding your license.

If you have any questions for the Home Inspectors Licensing Board please email pla9@pla.in.gov or call 317-234-3009.

FOR OFFICE USE ONLY

Renewal Fee	Receipt No.	Date
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